

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

CASE NO.: 1:23-CV-20821

GARY BAUGH,

Plaintiff,

vs.

NOMI HEALTH, INC. AND
MEDX STAFFING, INC.,

Defendants.

SUMMONS IN A CIVIL ACTION

TO: NOMI HEALTH, INC.
c/o C T CORPORATION SYSTEM, its Registered Agent
1200 South Pine Island Road
PLANTATION, FL 33324

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Brian H. Pollock, Esq.
FairLaw Firm
135 San Lorenzo Avenue
Suite 770
Coral Gables, FL 33146
Tel: (305) 230-4884
brian@fairlawattorney.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: _____

CLERK OF COURT

Signature of Clerk or Deputy Clerk

Civil Action No.:

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____ was received by me on *(date)* _____.

- I personally served the summons on the individual at *(place)* _____, _____, _____ on *(date)* _____; or
- I left the summons at the individual's residence or usual place of abode with *(name)* _____, a person of suitable age and discretion who resides there, _____ on *(date)* _____, and mailed a copy to the individual's last known address; or
- I served the summons on *(name of individual)* _____ designated by law to accept service of process on behalf of *(name of organization)* _____ on *(date)* _____; or
- I returned the summons unexecuted because _____; or
- Other *(specify)*: _____

My fees are \$_____ for travel and \$_____ for services, for a total of \$_____

I declare under penalty of perjury that this information is true.

Date: _____

Server's Signature

Printed Name and Title

Server's address

Additional information regarding attempted service, etc: